

## CITY OF HIGH POINT NORTH CAROLINA GUARANTEE FOR APPLICANT'S UTILITY BILL

named below, I hereby agr amount not to exceed \$	re utility service(s) at this or ree that I will upon request a for service(s) reaid by the applicant. This a	from the City ondered to said	Of High Point pay an applicant if for any
transferred to my utility se amount remains unpaid. I	cant's unpaid final bills not ervice(s) account and my ser also understand that this ur orth Carolina Department o	rvice(s) may be npaid amount r	e disconnected if this
Signature of Guarantor	SS#		DL#
Acct#	Street Address		
Signature of Applicant	SS#		DL#
Acct#	Street Address		
Notary:		_ Date:	
Commission Expires:		_	SEAL
		Date:	
CUSTOMER SERVICE R	REPRESENTATIVE		

\*This printed material will be provided in an alternative format upon request.

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